nsurer Name: American Automobile Insurance Company		NAIC Number 21849		
		EXHIBIT A		
Form (RF-3)				
· · · ·	SUMMARY SHEET			
Change in Company's premium or rat				
revision effective	September 1, 2010	· ·		
(1)	(2)	(3)		
( - /	Annual Premium	Percent		
Coverage	Volume (Illinois) *	Change ( + or - ) **		
1. Automobile Liability				
Private Passenger				
Commercial	176,310	-8.7%		
2. Automobile Physical Damage	<del></del>			
Private Passenger				
Commercial	49,055	-3.7%		
3. Liability Other Than Auto				
4. Burglary and Theft				
5. Glass				
6. Fidelity				
7. Surety				
8. Boiler and Machinery				
9. Fire				
10. Extended Coverage				
11. Inland Marine				
12. Homeowners		****		
I3. Commercial Multi-Peril				
14. Crop Hail				
5. Other	54,212	0.0%		
Line of Insurance				
Enic of modification				
loes filing only apply to certain territory (1 lasses? If so, specify: NO	erritories) or certain			
rief description of filing. ( If filing follows rganization, specify organizations ):	rates of an advisory Adopting ISO's Loss Cost Re	eference # CA-2010-BRLA1		
Adjusted to reflect all prior rate chang Change in Company's premium level result from application of new rates				
		Automobile Insurance Company		
		Name of Company		
	They	Pogulatory		
		Regulatory		

nsurer Name: The American Insurance Company		NAIC Number21857		
		EXHIBIT A		
Form (RF-3)				
	SUMMARY SHEET			
Change in Company's premium or rate		•		
revision effective	September 1, 2010	·		
(1)	(2) Annual Premium	(3) Percent		
Coverage	Volume (Illinois) *	Change ( + or - ) **		
Automobile Liability				
Private Passenger				
Commercial	478,456	-10.3%		
Automobile Physical Damage				
Private Passenger				
Commercial	176,215	-2.1%		
Liability Other Than Auto				
Burglary and Theft				
5. Glass				
6. Fidelity				
7. Surety				
8. Boiler and Machinery				
9. Fire				
3. File 10. Extended Coverage				
10. Extended Coverage 11. Inland Marine				
11. Illiand Manne 12. Homeowners		•		
12. Homeowners 13. Commercial Multi-Peril				
14. Crop Hail 15. Other	185,554	0.0%		
Line of Insurance	100,004			
Line of insurance				
Ooes filing only apply to certain territory ( telasses? If so, specify: NO	erritories) or certain			
Brief description of filing. ( If filing follows representation, specify organizations ):	ates of an advisory Adopting ISO's Loss Cost Re	eference # CA-2010-BRLA1		
Adjusted to reflect all prior rate change Change in Company's premium level was result from application of new rates				
	The A	merican Insurance Company		
		Name of Company		
	Change &	Regulator		
		Negulatul		

Insurer Name: Associated Indemnity C	NAIC Number 21865	
		EXHIBIT A
Form (RF-3)		
( )	SUMMARY SHEET	
Change in Company's premium or r	ate level produced by rate	
revision effective	September 1, 2010	·
(1)	(2)	(3)
( ' )	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change ( + or - ) **
Coverage	voidine (illinois)	Change ( 1 of - )
Automobile Liability		
Private Passenger		
Commercial	25,076	-9.3%
Automobile Physical Damage		
Private Passenger		
Commercial	6,877	-4.2%
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		<del></del>
7. Surety	Man a control of the	
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other	208,505	0.0%
Line of Insurance		0.070
Line of insurance		
Does filing only apply to certain territory	( territories) or certain	
classes? If so, specify: NO		
Brief description of filing. ( If filing follow	s rates of an advisory	
organization, specify organizations ):	Adopting ISO's Loss Cost Re	eference # CA-2010-BRLA1
* Adjusted to reflect all prior rate char	nges	
** Change in Company's premium leve		
result from application of new rates	o	
roodk nom apphoaton or now rates		
	Asso	ciated Indemnity Corporation
		Name of Company
	They,	Regulatory A
		Official - Title

## FORM (RF-3)

#### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective NB: 06/06/2010 RB: 07/12/2010

(1)	(2) Annual Premium	(3) Percent
Coverage	- Volume (Illinois) *	Change (+or-) **
Automobile Liability Private	)	
Passenger		
Commercial	\$6,325,375	2.3%
Automobile Physical Dama	g	
Private Passenger		•
Commercial	\$2,274,127	-0.5%
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery	**************************************	
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Life of Insurance		
Life of insurance		
Does filing only apply to ce	ertain territory (territories) or	r certain
Classes? If so,	,	
specify: No.		
Brief description of filing. (	If filing follows rates of an a	advisory
Organization, specify	g renerie rates er arra	,
organization):	We are changing base ra	tes, class relativities, territory relativitie
,		ge factors, vehicle age relativities, fleet
	tes. Also, we are introducing a Comme	
*Adjusted to reflect all prior		
**Change in Company's pr		ult from application of new
rates.	55,11 1010. Willon Will 1000	and it still dependent of how
raies.		

Auto-Owners Insurance Company

Name of Company
Kelly Staake, Administrator, Commercial Auto Actuarial
Official – Title

1.

2

3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

## FORM (RF-3)

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective <u>04/26/2010</u>.

| (1)                                  | (2)<br>Annual Premium          | (3)<br>Percent                  |
|--------------------------------------|--------------------------------|---------------------------------|
| Coverage                             | Volume (Illinois) *            | Change (+or-) **                |
| Automobile Liability Private         |                                |                                 |
| Passenger                            |                                |                                 |
| Commercial                           | 4,412,300                      | -3.6%                           |
| Automobile Physical Damag            |                                |                                 |
| Private Passenger                    |                                |                                 |
| Commercial                           |                                |                                 |
| Liability Other Than Auto            |                                |                                 |
| Burglary and Theft                   |                                |                                 |
| Glass                                |                                |                                 |
| Fidelity                             |                                |                                 |
| Surety                               |                                |                                 |
| Boiler and Machinery                 |                                |                                 |
| Fire                                 |                                |                                 |
| Extended Coverage                    |                                |                                 |
| Inland Marine                        |                                |                                 |
| Homeowners                           |                                |                                 |
| Commercial Multi-Peril               |                                |                                 |
| Crop Hail                            |                                |                                 |
| Other                                |                                |                                 |
| Life of Insurance                    |                                |                                 |
| Does filing only apply to certa      | ain territory (territories) or | certain                         |
| Classes? If so,                      |                                |                                 |
| specify: No                          |                                |                                 |
|                                      |                                |                                 |
| Brief description of filing. (If I   | iling follows rates of an a    | dvisory                         |
| Organization, specify                | <b>g</b>                       | •                               |
| organization):                       | We are requesting a c          | lecrease of 3.6% from our rates |
| that were last filed June 1, 2006 (r | iew) and August 1, 2006 (ren   | ewal).                          |
|                                      |                                |                                 |
| *Adjusted to reflect all prior ra    |                                |                                 |
| **Change in Company's pren           | nium level which will resu     | ılt from application of new     |
| rates.                               |                                |                                 |
|                                      | Canal Insurance (              |                                 |
|                                      |                                | me of Company                   |
|                                      |                                | vine - Compliance Analyst       |
|                                      |                                | Official - Title                |

## FORM (RF-3)

## SUMMARY SHEET

| Change in Company's premium or ra | ate level produced by rate revision |
|-----------------------------------|-------------------------------------|
| effective 10/01/2010              |                                     |

| -              | (1)   | (2)<br>Annual Premium         | (3)<br>Percent                      |
|----------------|---|-------------------------------|-------------------------------------|
|                | Coverage  | Volume (Illinois) *           | Change (+or-) **                    |
| 1.             | Automobile Liability Private Passenger                                  |                               |                                     |
|                | Commercial  | 12,943                        | -8.3%                               |
| 2              | Automobile Physical Damag<br>Private Passenger<br>Commercial            | 8,907                         | -8.3%                               |
| 3.             | Liability Other Than Auto   |                               |                                     |
| <b>4</b> .     | Burglary and Theft  |                               |                                     |
| <del>5</del> . | Glass   |                               |                                     |
| 6.             | Fidelity  |                               |                                     |
| 7.             | Surety  |                               |                                     |
| 8.             | Boiler and Machinery  | ·                             |                                     |
| 9.             | Fire  |                               |                                     |
| 10.            | Extended Coverage   |                               |                                     |
| 11.            | Inland Marine   |                               |                                     |
| 12.            | Homeowners  |                               |                                     |
| 13.            | Commercial Multi-Peril  |                               |                                     |
| 14.            | Crop Hail   |                               |                                     |
| 15.            | Other   |                               |                                     |
|                | Life of Insurance   |                               |                                     |
| •              | Does filing only apply to certa Classes? If so, specify: NOT A          | in territory (territories) or | certain                             |
|                |   |                               |                                     |
|                | Brief description of filing. (If f Organization, specify organization): |                               | dvisory<br>THE OCTOBER 1, 2010 LOSS |
|                | COSTS IN ISO CIRCULAR LI-CA-  | 2010-086 ISO REVISION D       | ESIGNATION NUMBER :                 |
|                | CA-2010-BRLA1. DSIC WILL IMP  | PLEMENT THESE LOSS COS        | STS ON OCTOBER 1, 2010.             |
|                | *Adjusted to reflect all prior ra<br>**Change in Company's premates.    |                               | It from application of new          |
|                | เดเซอ.  | DIAMOND STATE                 | INSURANCE COMPANY                   |
|                |   |                               | me of Company                       |
|                |   |                               | N - VICE PRESIDENT                  |

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level proeduced by rate revision effective: |  | 12/1/2010                          |  |  |
|---|--|------------------------------------|--|--|
| (1)<br><u>Coverage</u>  | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u> | (3)<br>Percent<br>Change (+ or-)** |  |  |
| Automobile Liability Private Passenger  |  | 10.20/                             |  |  |
| Commercial  | \$360,038  | -10.3%                             |  |  |
| Automobile Physical Damage Private Passenger                                    |  | 3.00/                              |  |  |
| Commercial  | \$43,520   | 2.9%                               |  |  |
| Liability Other Than Auto   |  |                                    |  |  |
| 4. Burglarly and Theft  |  | <del></del>                        |  |  |
| 5. Glass  |  |                                    |  |  |
| 6. Fidelity   |  |                                    |  |  |
| 7. Surety   |  |                                    |  |  |
| 8. Boiler and Machinery   |  | <del></del>                        |  |  |
| 9. Fire   |  |                                    |  |  |
| 10. Extended Coverage   |  |                                    |  |  |
| 11. Inland Marine   |  |                                    |  |  |
| 12. Homeowners  |  |                                    |  |  |
| 13. Commercial Multi-Peril  |  |                                    |  |  |
| 14. Crop Hail   | ·  |                                    |  |  |
| 15. Other   |  |                                    |  |  |
| Does filing only apply to certain territory (territories) or certain            | n classes? If so, specifiy:                        |                                    |  |  |
| Brief description of filing. (If filing follows rates or an advisor             | y organization, specify organization               | 1                                  |  |  |
| Adopt ISO loss costs (Reference Filing # CA-2010-BRLA1) a                       | nd revise Loss cost multipliers                    |                                    |  |  |
|   |  |                                    |  |  |

Employers Insurance Company of Wausau

Name of Company

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates..

## SUMMARY SHEET

| Change in Compa    | ny's premium | or rate | level | produced | by | rate |
|--------------------|--------------|---------|-------|----------|----|------|
| revision effective | 7/1/10       |         |       |          |    |      |

|          | (1)   | (2)<br>Annual Premium             | (3)<br>Percent                            |
|----------|---|-----------------------------------|---|
|          | Coverage  | Volume (Illinois) *               | <u>Change (+ or -) **</u>                 |
| 1.       | Automobile Liability Private Passenger  |                                   |   |
| 2.       | Commercial<br>Automobile Physical Damage<br>Private Passenger   | 3,515,399                         | +0.176%                                   |
|          | Commercial  | 1,022,140                         | +0.000%                                   |
| 3.       | Liability Other Than Auto   |                                   |   |
| 4.       | Burglary and Theft  |                                   |   |
| 5.       | Glass   |                                   |   |
| 6.       | Fidelity  |                                   |   |
| 7.       | Surety  |                                   |   |
| 8.       | Boiler and Machinery  |                                   |   |
| 9.       | Fire  |                                   |   |
| 10.      | Extended Coverage   |                                   |   |
| 1.       | Inland Marine   |                                   |   |
| 2.       | Homeowners  |                                   |   |
| 13.      | Commercial Multi-Peril  |                                   |   |
| 14.      | Crop Hail   |                                   |   |
| 15.      | Other   |                                   |   |
|          | Line of Insurance   |                                   |   |
| <br>Brie | es filing only apply to certain territory  ef description of filing. (If filing follows                           | s rates of an advisory organizati | on, specify organization):                |
| ** (     | Adjusted to reflect all prior rate che Change in Company's premium level will result from application of new rate | which                             |   |
| ٧        | viii result from application of new rate  | Federated Mutu                    | al Insurance Company                      |
|          |   | Na                                | ame of Company                            |
|          |   | Don Ei                            | Izon Vice President                       |
|          |   | Dall FI                           | lzen – Vice President<br>Official - Title |

| 01111 | (N -0)  | SUMMARY SHEET                       |                      |
|-------|---|-------------------------------------|----------------------|
|       | Change in Company's provision effective 7/1/20                | emium or rate level produced        | by rate              |
|       | (1)   | (2)<br>Annual Premium               | (3)<br>Percent       |
|       | <u>Coverage</u>   | Volume (Illinois) *                 | Change (+ or -) **   |
| 1.    | Automobile Liability Private Passenger                        |                                     |                      |
| 2.    | Commercial<br>Automobile Physical Damage<br>Private Passenger | 737,600                             | +0.048%              |
|       | Commercial  | 150,399                             | +0.000%              |
| 3.    | Liability Other Than Auto                                     |                                     |                      |
| 4.    | Burglary and Theft  |                                     |                      |
| 5.    | Glass   |                                     |                      |
| 6.    | Fidelity  |                                     |                      |
| 7.    | Surety  |                                     | ·                    |
| 8.    | Boiler and Machinery  |                                     |                      |
| 9.    | Fire  |                                     |                      |
| 10.   | Extended Coverage   |                                     |                      |
| 11.   | Inland Marine   |                                     |                      |
| 12.   | Homeowners  |                                     |                      |
| 13.   | Commercial Multi-Peril  |                                     |                      |
| 14.   | Crop Hail   |                                     |                      |
| 15.   | Other   |                                     |                      |
|       | Line of Insurance   |                                     |                      |
| Doe   | es filing only apply to certain territory                     | (territories) or certain classes? I | f so, specify:       |
|       | ef description of filing. (If filing follow                   |                                     |                      |
| * /   | Adjusted to reflect all prior rate ch                         | anges.                              |                      |
| ** C  | Change in Company's premium level                             | which                               |                      |
| W     | vill result from application of new rate                      |                                     | ce Insurance Company |
|       |   |                                     | ame of Company       |

Dan Filzen – Vice President Official - Title

<sup>\*</sup> Adjuste \*\* Change

will res

| surer Name: Fireman's Fund Insur  | ance Company                | NAIC Number 21873          |
|---|-----------------------------|----------------------------|
|   |                             | EXHIBIT A                  |
| orm (RF-3)  |                             |                            |
| , ,   | SUMMARY SHEET               |                            |
| Change in Company's premium or  | rate level produced by rate |                            |
| revision effective  | September 1, 2010           |                            |
|   | (2)                         | (3)                        |
| (1)   | Annual Premium              | Percent                    |
| Coverage  | Volume (Illinois) *         | Change ( + or - ) **       |
| Coverage  | voidifie (filliflois)       | Change ( 1 or )            |
| Automobile Liability  |                             |                            |
| Private Passenger   | 050.405                     | 0.40/                      |
| Commercial  | 252,485                     | 8.4%                       |
| . Automobile Physical Damage  |                             |                            |
| Private Passenger   |                             | 4.00/                      |
| Commercial  | 82,565                      | -4.0%                      |
| . Liability Other Than Auto   |                             |                            |
| . Burglary and Theft  |                             |                            |
| . Glass   |                             |                            |
| Fidelity  |                             |                            |
| Surety  |                             |                            |
| Boiler and Machinery  |                             |                            |
| Fire  |                             |                            |
| . Extended Coverage   |                             |                            |
| . Inland Marine   |                             |                            |
| . Homeowners  |                             |                            |
| Commercial Multi-Peril  |                             |                            |
| l. Crop Hail  |                             |                            |
| o. Other  | 251,385                     | 0.0%                       |
| Line of Insurance   |                             | ·                          |
| pes filing only apply to certain territor asses? If so, specify:  NO  NO  (15 filing falls                |                             |                            |
| ief description of filing. (If filing folloganization, specify organizations):                            | Adopting ISO's Loss Cost Re | eference # CA-2010-BRLA1   |
|   |                             |                            |
| Adjusted to reflect all prior rate che Change in Company's premium le result from application of new rate | evel which will             |                            |
|   | Firemar                     | n's Fund Insurance Company |
|   |                             | Name of Company            |
|   |                             |                            |
|   | Treng 7.                    | Regulatory Ana             |

## **ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET**

| Change in Company's premium or rate level proeduced by ra            | 12/1/2010  |                                    |
|--|--|------------------------------------|
| (1)<br><u>Coverage</u>   | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u> | (3)<br>Percent<br>Change (+ or-)** |
| Automobile Liability Private Passenger     Commercial                | \$332,643  | -10.3%                             |
| Automobile Physical Damage Private Passenger     Commercial          | \$33,126   | 2.9%                               |
| 3. Liability Other Than Auto 4. Burglarly and Theft                  | 71   |                                    |
| 5. Glass   |  |                                    |
| 6. Fidelity  |  |                                    |
| 7. Surety  |  |                                    |
| 8. Boiler and Machinery  |  |                                    |
| 9. Fire  |  |                                    |
| 10. Extended Coverage 11. Inland Marine                              |  |                                    |
| 12. Homeowners   |  |                                    |
| 13. Commercial Multi-Peril   |  |                                    |
| 14. Crop Hail  | -  |                                    |
| 15. Other  |  |                                    |
| Line of Insurance  |  |                                    |
| Does filing only apply to certain territory (territories) or certain | classes? If so, specifiy:                          |                                    |
|  |  |                                    |
| Brief description of filing. (If filing follows rates or an advisory | organization, specify organization                 | 1                                  |
| Adopt ISO loss costs (Reference Filing # CA-2010-BRLA1) and          | d revise Loss cost multipliers                     |                                    |
|  |  |                                    |

The First Liberty Insurance Corporation

Name of Company

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates..

## FORM (RF-3)

## **SUMMARY SHEET**

| Change in Company's premium or ra | te level produced by rate revision |
|-----------------------------------|------------------------------------|
| effective 10/01/2010              | •                                  |

| (1)                                    | (2)<br>Annual Premium            | (3)<br>Percent              |
|--|----------------------------------|-----------------------------|
| Coverage                               | Volume (Illinois) *              | _ Change (+or-) **          |
| Automobile Liability Private           |                                  |                             |
| Passenger                              |                                  |                             |
| Commercial                             | 432452                           | -11.9                       |
| Automobile Physical Damag              |                                  | •                           |
| Private Passenger                      |                                  |                             |
| Commercial                             | 41743                            | -4.0                        |
| Liability Other Than Auto              |                                  |                             |
| Burglary and Theft                     |                                  |                             |
| Glass                                  |                                  |                             |
| Fidelity                               |                                  |                             |
| Surety                                 |                                  |                             |
| Boiler and Machinery                   |                                  |                             |
| Fire                                   | <u> </u>                         |                             |
| Extended Coverage                      |                                  |                             |
| Inland Marine                          |                                  |                             |
| Homeowners                             |                                  |                             |
| Commercial Multi-Peril                 | ·                                |                             |
| Crop Hail                              |                                  |                             |
| Other                                  |                                  |                             |
| Life of Insurance                      |                                  |                             |
| Does filing only apply to certa        | in territory (territories) or    | certain                     |
| Classes? If so,                        | <b>.</b>                         |                             |
| specify: Trucks,                       | Tractors, Trailers               |                             |
| Brief description of filing. (If f     | iling follows rates of an a      | ndvisory                    |
| Organization, specify                  | 3                                | •                           |
| organization):                         | ISO Revision Number CA           | -2010-BRLA1                 |
| ISO Illinois Revised Commercial Auto A | dvisory Prospective Loss Costs e | ffective 10/01/2010         |
| *Adjusted to reflect all prior ra      | to changes                       |                             |
| **Change in Company's premates.        |                                  | llt from application of new |
|  | Gateway Insurance                | e Company                   |
|  |                                  | me of Company               |
|  | Laura Ellsworth, Co              | ompliance Specialist        |

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level proeduced by   | 12/1/2010  |  |  |  |
|--|--|--|--|--|
| (1)<br><u>Coverage</u>   | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u> | (3)<br>Percent<br>Change (+ or-)**                           |  |  |
| <ol> <li>Automobile Liability Private Passenger         Commercial</li> <li>Automobile Physical Damage Private Passenger         Commercial</li> <li>Liability Other Than Auto</li> <li>Burglarly and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> <li>Other</li> </ol>        | \$527,308<br>\$153,107                             | -10.3%   |  |  |
| Does filing only apply to certain territory (territories) or certain classes? If so, specifiy:  Brief description of filing. (If filing follows rates or an advisory organization, specify organization Adopt ISO loss costs (Reference Filing # CA-2010-BRLA1) and revise Loss cost multipliers  *Adjusted to reflect all prior rate changes.  **Change in Company's premium level which will result from application of new rates  Liberty Insurance Corporation |  |  |  |  |
|  | Lori Hartleben - :                                 | me of Company  Senior State Filing Analyst  Official - Title |  |  |

## ILLINOIS DEPARTMENT OF INSURANCE

## **SUMMARY SHEET**

| Change in Company's premium or rate level produced by rate revision effective     |  | 10-1-2010                                  |  |
|---|--|--|--|
| (1) <u>Coverage</u>   | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u> | (3)<br>Percent<br><u>Change (+ or -)**</u> |  |
| Automobile Liability Private     Passenger Commercial                             | \$54,267   | - 9.9                                      |  |
| 2. Automobile Physical Damage   | \$6,895  | - 3.5                                      |  |
| 3. Liability Other Than Auto  |  |  |  |
| Burglary and Theft  |  |  |  |
| 5. Glass  |  |  |  |
| 6. Fidelity   |  |  |  |
| 7. Surety   |  |  |  |
| 8. Boiler and Machinery   |  |  |  |
| 9. Fire   |  |  |  |
| 10. Extended Coverage 11. Inland Marine   |  |  |  |
| 12. Homeowners  |  |  |  |
| 13. Commercial Multi-Peril  |  |  |  |
| 14. Crop Hail   |  |  |  |
| 15 Other  |  |  |  |
| Line of Insurance   |  |  |  |
| Door films only apply to portain torritory  | (territories) or certain classes? If so, spec      | ific.                                      |  |
| boes ming only apply to certain terniory  | (territories) or certain classes: if so, spec      | шу   |  |
| Brief description of filing (If filing follows                                    | rates of an advisory organization, specify         | v organization):                           |  |
| Adoption of ISO Loss Costs CA-2010-BF   |  |  |  |
|   |  |  |  |
| *Adjusted to reflect all prior rate changes **Change in Company's premium level w | s.<br>which will result from application of new ra | tes.                                       |  |
|   | Liberty  | Insurance Underwriters, Inc.               |  |
|   | Liberty  | Name of Company                            |  |
|   | Lori Hartleben                                     | Senior State Filings Analyst               |  |
|   |  | Official - Title                           |  |

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level proeduced by rate revision effective:  |   | 12/1/2010                          |
|--|---|------------------------------------|
| (1)<br><u>Coverage</u>   | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u>                          | (3)<br>Percent<br>Change (+ or-)** |
| Automobile Liability Private Passenger     Commercial  | \$416,276   | -10.3%                             |
| <ol> <li>Automobile Physical Damage Private Passenger<br/>Commercial</li> <li>Liability Other Than Auto</li> </ol>           | \$85,812  | 2.9%                               |
| <ul><li>4. Burglarly and Theft</li><li>5. Glass</li></ul>  |   |                                    |
| <ol> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> </ol>   |   |                                    |
| 9. Fire 10. Extended Coverage  |   |                                    |
| <ul><li>11. Inland Marine</li><li>12. Homeowners</li></ul>   |   |                                    |
| <ul><li>13. Commercial Multi-Peril</li><li>14. Crop Hail</li><li>15. Other</li></ul>   |   |                                    |
| Line of Insurance  |   |                                    |
| Does filing only apply to certain territory (territories) or cer   | rtain classes? If so, specifiy:   |                                    |
| Brief description of filing. (If filing follows rates or an advi-<br>Adopt ISO loss costs (Reference Filing # CA-2010-BRLA1) | sory organization, specify organization<br>and revise Loss cost multipliers | ı                                  |
| *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result fr                        | om application of new rates   |                                    |
|  |   | surance Company                    |
|  | N   | ame of Company                     |

## **ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET**

| Change in Company's premium or rate level proeduced by rate revision effective:   |   | 12/1/2010                          |  |
|---|---|------------------------------------|--|
| (1) <u>Coverage</u>   | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u>                      | (3)<br>Percent<br>Change (+ or-)** |  |
| Automobile Liability Private Passenger     Commercial     Automobile Physical Damage Private Passenger                        | \$7,252,488   | -10.3%                             |  |
| Commercial 3. Liability Other Than Auto   | \$813,758   | 2.9%                               |  |
| <ul><li>4. Burglarly and Theft</li><li>5. Glass</li><li>6. Fidelity</li></ul>   |   |                                    |  |
| 7. Surety 8. Boiler and Machinery 9. Fire   |   |                                    |  |
| 10. Extended Coverage 11. Inland Marine   |   |                                    |  |
| 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail   |   |                                    |  |
| 15. Other  Line of Insurance  |   |                                    |  |
| Does filing only apply to certain territory (territories) or certain  | n classes? If so, specifiy:   |                                    |  |
| Brief description of filing. (If filing follows rates or an advisor Adopt ISO loss costs (Reference Filing # CA-2010-BRLA1) a | y organization, specify organizatior<br>nd revise Loss cost multipliers |                                    |  |
|   | '   | ·                                  |  |

Liberty Mutual Fire Insurance Company Name of Company

<sup>\*</sup>Adjusted to reflect all prior rate changes.
\*\*Change in Company's premium level which will result from application of new rates..

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level proeduced by rate revision effective:   |  | 12/1/2010                                    |  |
|---|--|--|--|
| (1)<br><u>Coverage</u>  | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u>                             | (3)<br>Percent<br>Change (+ or-)**           |  |
| <ol> <li>Automobile Liability Private Passenger         Commercial</li> <li>Automobile Physical Damage Private Passenger         Commercial</li> <li>Liability Other Than Auto</li> <li>Burglarly and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> </ol> | \$268,886<br>\$36,510  | -17.3%<br>-5.0%                              |  |
| <ul> <li>9. Fire</li> <li>10. Extended Coverage</li> <li>11. Inland Marine</li> <li>12. Homeowners</li> <li>13. Commercial Multi-Peril</li> <li>14. Crop Hail</li> <li>15. Other  Line of Insurance</li> </ul> Does filing only apply to certain territory (territories) or certain                   | ertain-classes? If so, specifiy:   |  |  |
| Brief description of filing. (If filing follows rates or an adv<br>Adopt ISO loss costs (Reference Filing # CA-2010-BRLA1   | risory organization, specify organization  1) and revise Loss cost multipliers | 1  |  |
| *Adjusted to reflect all prior rate changes.  **Change in Company's premium level which will result for   | from application of new rates  |  |  |
|   | LM Insurance Cor   | poration ame of Company                      |  |
|   |  | Senior State Filing Analyst Official - Title |  |

| surer Name: National Surety Corporation   | on                          | NAIC Number 21881                     |
|---|-----------------------------|---------------------------------------|
|   |                             | EXHIBIT A                             |
| orm (RF-3)  | SUMMARY SHEET               |                                       |
|   |                             |                                       |
| Change in Company's premium or rate revision effective  | September 1, 2010           |                                       |
| (1)   | (2)                         | (3)                                   |
| ,   | Annual Premium              | Percent                               |
| Coverage  | Volume (Illinois) *         | Change ( + or - ) **                  |
| . Automobile Liability  |                             | · · · · · · · · · · · · · · · · · · · |
| Private Passenger   |                             |                                       |
| Commercial  | 285,883                     | -8.4%                                 |
| 2. Automobile Physical Damage   |                             |                                       |
| Private Passenger   |                             |                                       |
| Commercial  | 74,945                      | -3.7%                                 |
| B. Liability Other Than Auto  | - 1,010                     |                                       |
| L. Burglary and Theft   |                             |                                       |
| 5. Glass  | <del></del>                 |                                       |
| 6. Fidelity   |                             |                                       |
| . Surety  |                             |                                       |
| B. Boiler and Machinery   |                             |                                       |
| ). Fire   |                             |                                       |
| 0. Extended Coverage  |                             |                                       |
| Inland Marine   |                             |                                       |
| 2. Homeowners   |                             |                                       |
| 3. Commercial Multi-Peril   |                             |                                       |
| 4. Crop Hail  |                             |                                       |
| 5. Other  | 117,729                     | 0.0%                                  |
| Line of Insurance   | 111,123                     |                                       |
| pes filing only apply to certain territory ( to   | erritories) or certain      |                                       |
| asses? If so, specify: NO NO  |                             |                                       |
| rief description of filing. ( If filing follows r   |                             |                                       |
| rganization, specify organizations ):   | Adopting ISO's Loss Cost Re | eference # CA-2010-BRLA1              |
| -   |                             |                                       |
| Adjusted to reflect all prior rate change Change in Company's premium level versult from application of new rates |                             |                                       |
|   |                             |                                       |
|   | Na                          | ational Surety Corporation            |
|   |                             | Name of Company                       |
|   |                             | · · · · · · · · · · · · · · · · · · · |
|   | بد مر                       | all -                                 |

Regulatory An

## Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

| Change in Company's premiu  | m or rate level produced by rate revision effective  | August 1, 2010                             |
|---|--|--|
| (1)<br><u>Coverage</u>  | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u>   | (3)<br>Percent<br><u>Change (+ or -)**</u> |
| Automobile Liability Priva     Passenger Commerce                 |  | . 0  |
| 2. Automobile Physical Dam  | nage   | •  |
|   | ommercial <u>970,049</u>   | 0  |
| 3. Liability Other Than Auto                                      |  |  |
| 4. Burglary and Theft   |  |  |
| 5. Glass  |  |  |
| 6. Fidelity   |  |  |
| 7. Surety   |  |  |
| 8. Boiler and Machinery   |  |  |
| 9. Fire   |  |  |
| <ul><li>10. Extended Coverage</li><li>11. Inland Marine</li></ul> |  |  |
| 12. Homeowners  |  |  |
| 13. Commercial Multi-Peril  |  |  |
| 14. Crop Hail   |  |  |
| 15 Other  |  |  |
| Line of Insurance   | e  |  |
| Does filing only apply to certa                                   | in territory (territories) or certain classes? If so, specify:   | No .                                       |
| Brief description of filing. (If to Commercial Auto loss costs a  | filing follows rates of an advisory organization, specify and rules filings CA-2009-RLC09 and CA-2009-RRU09. | organization): Adoption of ISO 2010        |
|   |  |  |
|   |  |  |
| *Adjusted to reflect all prior ra<br>**Change in Company's prem   | nium level which will result from application of new rates.  | rs Insurance Company                       |
|   | <u> </u>   | lame of Company                            |
|   | Valerie Bri  | nk, Compliance Analyst                     |
|   |  | Official – Title                           |

# Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| hange in company's premium or rate level produced by rate revision effective |   | 10/1/2010                              |
|--|---|--|
| (1)  | (2)   | (3)                                    |
| ( ' ')   | Annual Premium                                  | Percent                                |
| Coverage   | Volume ( Illinois )*                            | Change ( + or - )                      |
| 1. Automobile Liability Private  |   |  |
| Passenger Commercial   |   |  |
| 2. Automobile Physical Damage  |   |  |
| Private Passenger Commercial   | \$1,973   | -3.5%                                  |
| 3. Liability Other Than Auto   |   |  |
| Burglary and Theft   |   |  |
| 5. Glass   |   |  |
| 6. Fidelity  |   |  |
| 7. surety  |   |  |
| 8. Boiler and Machinery  |   |  |
| 9. Fire  |   |  |
| 10. Extended Coverage  |   |  |
| 11. Inland Marine  |   | ······································ |
| 12. Homeowners   |   | <del></del>                            |
| 13. Commercial Multi-Peril   |   |  |
| 14. Crop Hail  |   |  |
| 15. Other  |   |  |
| Line of Insurance  |   |  |
| oes filing only apply to certain territory ( to                              | erritories ) or certain classes? If so, specify | : No                                   |
|  |   |  |
|  |   |  |
|  | rates of an advisory organization, specify or   | ganization ):                          |
| riet description of thing . ( It thing follows )                             |   |  |
| rief description of filing . ( If filing follows in doption of ISO Loss Cost | atos of all action, organization, opening of    | •                                      |

North American Elite Insurance Company
Name of company

LeAnne Pope, Team Leader - State Filings Official-Title

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

## FORM (RF-3)

## **SUMMARY SHEET**

| Change in Company        | 's premium or  | rate level | produced | by rate | revision |
|--------------------------|----------------|------------|----------|---------|----------|
| effective NB: 06/06/2010 | RB: 07/12/2010 |            |          |         |          |

| <u>-</u> | (1)   | (2)<br>Annual Premium         | (3)<br>Percent                             |
|----------|---|-------------------------------|--|
|          | Coverage  | Volume (Illinois) *           | Change (+or-) **                           |
| 1.       | Automobile Liability Private                    |                               |  |
|          | Passenger                                       |                               |  |
|          | Commercial                                      | \$5,359,655                   | 4.8%                                       |
| 2        | Automobile Physical Damag                       |                               |  |
|          | Private Passenger                               |                               |  |
|          | Commercial                                      | \$2,487,519                   | 0.6%                                       |
| 3.       | Liability Other Than Auto                       |                               |  |
| 4.       | Burglary and Theft                              |                               |  |
| 5.       | Glass   |                               |  |
| 6.       | Fidelity  |                               |  |
| 7.       | Surety  |                               |  |
| 8.       | Boiler and Machinery                            |                               |  |
| 9.       | Fire  | -                             |  |
| 10.      | Extended Coverage                               |                               |  |
| 11.      | Inland Marine                                   |                               |  |
| 12.      | Homeowners                                      |                               |  |
| 13.      | Commercial Multi-Peril                          |                               |  |
| 14.      | Crop Hail                                       |                               |  |
| 15.      | Other   |                               |  |
|          | Life of Insurance                               |                               |  |
| •        | Does filing only apply to certa Classes? If so, | in territory (territories) or | certain                                    |
|          | specify: No.                                    |                               |  |
|          | Brief description of filing. (If f              | iling follows rates of an a   | dvisory                                    |
|          | organization):                                  | We are changing base rai      | tes, territory relativities, class factors |
|          | fleet factors, the private passenger vehic      |                               |  |
|          | Also, we are introducing a Commercial Bu        |                               |  |
|          | *Adjusted to reflect all prior ra               |                               |  |
|          | **Change in Company's premates.                 |                               | lt from application of new                 |
|          | iaco.   | Owners Insurance              | : Company                                  |
|          |   |                               | me of Company                              |
|          |   |                               | nistrator, Commercial Auto Actuarial       |

## FORM (RF-3)

## **SUMMARY SHEET**

| Change in Company's premium or ra | te level produced by rate revision |
|-----------------------------------|------------------------------------|
| effective 09/01/2010              |                                    |

| -          | (1)<br>Coverage   | (2)<br>Annual Premium<br>Volume (Illinois) * | (3) Percent Change (+or-) **       |
|------------|---|--|------------------------------------|
| 1.         | Automobile Liability Private  | Volumo (minoro)                              |                                    |
| ٠.         | Passenger   |  |                                    |
|            | Commercial  | \$289,499                                    | 0.0%                               |
| 2          | Automobile Physical Damag   | Ψ203,433                                     | 0.070                              |
| _          | Private Passenger   |  | •                                  |
|            | Commercial  | \$ 94,943                                    | 0.0%                               |
| 3.         | Liability Other Than Auto   | Ψ 04,040                                     | 0.070                              |
| 4.         | Burglary and Theft  |  |                                    |
| 5.         | Glass   |  |                                    |
| 6.         | Fidelity  |  |                                    |
| 7.         | Surety  |  |                                    |
| 7.<br>8.   | Boiler and Machinery  |  |                                    |
| 9.         | Fire  | <u> </u>                                     |                                    |
| 9.<br>10.  | · ·· •  |  |                                    |
| 10.<br>11. | Extended Coverage Inland Marine   |  |                                    |
| 11.<br>12. |   |  |                                    |
| 12.<br>13. | Homeowners Commercial Multi-Peril   |  |                                    |
| 13.<br>14. |   |  |                                    |
|            | Crop Hail   |  |                                    |
| 15.        | Other   |  |                                    |
|            | Life of Insurance   |  |                                    |
| •          | Does filing only apply to certain Classes? If so.                         | n territory (territories) or                 | certain                            |
|            | specify: not appli  | icable                                       |                                    |
|            |   |  |                                    |
|            | Brief description of filing. (If fil Organization, specify organization): | -  | dvisory<br>filings CA-2009-RLC09 & |
|            | CA-2009-RRU09. We are also adop   |  |                                    |
|            | Exception Pages, edition 09-10.   |  |                                    |
|            | *Adjusted to reflect all prior rat **Change in Company's prem             |  | It from application of new         |
|            | rates.  |  |                                    |
|            |   |  | al Insurance Company               |
|            |   | Na   | me of Company                      |

Kenneth Andrews, Regional Vice President

#### **SUMMARY SHEET**

|                         | (1)  | (2)   | (3)  |
|-------------------------|--|---|--|
|                         | <u>Coverage</u>  | Annual Premium Volume (Illinois)*   | Percent Change (+ or -)**                                      |
| 1.                      | Automobile Liability   |   |  |
|                         | Private Passenger  |   |  |
|                         | Commercial   | 5,444,249   | -7.0%  |
| 2.                      | Automobile Physical Damage   |   |  |
|                         | Private Passenger  | 1 102 412   | 4.1%   |
| ,                       | Commercial   | 1,183,413   | 4.170  |
| 3.<br>1                 | Liability Other Than Auto Burglary and Theft   |   |  |
| 4.<br>5.                | Glass  |   |  |
| 5.<br>6.                | Fidelity   |   |  |
| 0.<br>7.                | Surety   |   |  |
| 8.                      | Boiler and Machinery   |   |  |
| 9.                      | Fire   |   |  |
| 0.                      | Extended Coverage  |   |  |
| 1.                      | Inland Marine  |   |  |
| 2.                      | Homeowners   |   |  |
| 3.                      | Commercial Multi-Peril   |   |  |
|                         | Crop Hail  |   |  |
| 4.                      |  |   |  |
|                         | Other  |   |  |
| 5.                      | Other Line of Insurance  | erritories) or certain classes? If so specify:  |  |
| 5.                      | Other Line of Insurance  | erritories) or certain classes? If so, specify:   |  |
|                         | Other Line of Insurance filing only apply to certain territory (to   | erritories) or certain classes? If so, specify:   | organization):   |
| oes f                   | Other  Line of Insurance  The control of Insurance  The control of Insurance  It is a second of Iso Filing Designations CA-  Indicated the control of Iso Filing Designation |   | -RRU09 and CA-2009-RLC09. for all other classes the LCM for    |
| rief                    | Other  Line of Insurance  The control of Insurance  The control of Insurance  It is a second of Iso Filing Designations CA-  Indicated the control of Iso Filing Designation | s rates of an advisory organization, specify of 2008-BRLA1, CA-2009-BRLA1, CA-2009 and hired autos will be revised to 2.475.  | -RRU09 and CA-2009-RLC09.<br>for all other classes the LCM for |
| 5. dopes f              | Other  Line of Insurance  Table 1  | s rates of an advisory organization, specify of 2008-BRLA1, CA-2009-BRLA1, CA-2009 and hired autos will be revised to 2.475. For classes the Phys Dam LCM remains at 1.8      | -RRU09 and CA-2009-RLC09.<br>or all other classes the LCM for  |
| ief Adop                | Other  Line of Insurance  The control of Insurance  The control of Insurance  It is a second of Iso Filing Designations CA-  Indicated the control of Iso Filing Designation | s rates of an advisory organization, specify of 2008-BRLA1, CA-2009-BRLA1, CA-2009 and hired autos will be revised to 2.475. For classes the Phys Dam LCM remains at 1.8 res. | -RRU09 and CA-2009-RLC09. For all other classes the LCM fo     |
| 5.  rief Adop n acciabi | Other  Line of Insurance  liling only apply to certain territory (to description of filing. (If filing follows otion of ISO Filing Designations CAddition, the LCM for non-owned autos lity will remain at 1.606. For all other distributed to reflect all prior rate change hange in Company's premium level will remain at 1.606.  | s rates of an advisory organization, specify of 2008-BRLA1, CA-2009-BRLA1, CA-2009 and hired autos will be revised to 2.475. For classes the Phys Dam LCM remains at 1.8 res. | -RRU09 and CA-2009-RLC09.<br>or all other classes the LCM for  |

Kevin O'Brien Compliance Analyst II
Official - Title

## FORM (RF-3)

## **SUMMARY SHEET**

| Change in Company's premium or ra | te level produced by rate revision |
|-----------------------------------|------------------------------------|
| effective 10/01/2010              | •                                  |

| (1)   | (2)<br>Annual Premium                 | (3)<br>Percent   |
|---|---------------------------------------|--|
| Coverage  | <ul><li>Volume (Illinois) *</li></ul> | _ Change (+or-) **   |
| Automobile Liability Private                    |                                       |  |
| Passenger                                       | \$204,045.00                          | -8.3%  |
| Commercial                                      | \$ 3,128.00                           | -8.3%  |
| Automobile Physical Damag                       |                                       |  |
| Private Passenger                               |                                       |  |
| Commercial                                      |                                       |  |
| Liability Other Than Auto                       |                                       |  |
| Burglary and Theft                              |                                       |  |
| Glass   |                                       |  |
| Fidelity  |                                       |  |
| Surety  |                                       |  |
| Boiler and Machinery                            |                                       |  |
| Fire  |                                       |  |
| Extended Coverage                               |                                       |  |
| Inland Marine                                   |                                       |  |
| Homeowners                                      |                                       |  |
| Commercial Multi-Peril                          |                                       |  |
| Crop Hail                                       |                                       | <del></del>  |
| Other   |                                       |  |
| Life of Insurance                               |                                       |  |
| Dona filima anticomulicta and                   | -i                                    |  |
| Does filing only apply to cert. Classes? If so. | ain territory (territories) or        | certain  |
| specify: N/A                                    |                                       |  |
| specify.  |                                       |  |
| Brief description of filing. (If                | filing follows rates of an a          | odvison  |
| Organization, specify                           | ming ronows rates or all a            | id visoi y   |
| organization):                                  | This filing is to adopt the           | ISO Loss Costs contained in  |
| ISO Circular #LI-CA-2010-086, revision          |                                       | The state of the s |
|   |                                       |  |

Preferred Professional Insurance Company
Name of Company
Denise A. Hill, Sr. VP, General Counsel, CCO
Official – Title

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

#### **SUMMARY SHEET**

|      | Change in Company's prem revision effective                   | nium or rate level produced by a October 1, 2010 | rate                                  |
|------|---|--|---------------------------------------|
|      | revision ellective  | October 1, 2010                                  |                                       |
|      | (1)   | (2)  | (3)                                   |
|      | (.,   | Annual Premium                                   | Percent                               |
|      | Coverage  | Volume (Illinois)*                               | Change ( + or -)**                    |
|      |   | <u> </u>   |                                       |
| 1.   | Automobile Liability  | <u>\$29,671</u>                                  | 8.3%                                  |
|      | Private Passenger   |  |                                       |
|      | Commercial  |  |                                       |
| 2.   | Automobile Physical Damage                                    | \$3,779  | -8.3%                                 |
|      | Private Passenger   |  |                                       |
|      | Commercial  | <del></del>                                      |                                       |
| 3.   | Liability Other Than Auto                                     |  |                                       |
| 4.   | Burglary and Theft  |  |                                       |
| 5.   | Glass   |  |                                       |
| 6.   | Fidelity  |  |                                       |
| 7.   | Surety  |  |                                       |
| 8.   | Boiler and Machinery  |  |                                       |
| 9.   | Fire  |  |                                       |
| 10.  | Extended Coverage   |  |                                       |
| 11.  | Inland Marine   |  |                                       |
| 12.  | Homeowners  |  |                                       |
| 13.  | Commercial Multi-Peril  |  |                                       |
| 14.  | Crop Hail   |  |                                       |
| 15.  | Other   |  |                                       |
|      | Line of Insurance   |  |                                       |
|      | s Filing only apply to certain territory ses? If so, specify: | (territories) or certain                         |                                       |
|      |   |  | · · · · · · · · · · · · · · · · · · · |
| Brie | f description of filing. (If filing follows                   | s rates of an advisory                           |                                       |
|      | inization, specify organization):                             | Adoption of ISO's Revised                        | Commercial Auto                       |
| 0.9- |   | Advisory Prospective Loss                        | <del></del>                           |
|      |   | CA-2010-BRLA1                                    |                                       |
|      |   | OA-2010-DILLAT                                   |                                       |
|      |   |  |                                       |
|      |   |  | <del>-</del>                          |
|      | * A !! A ! A ! A !! !   |  |                                       |
|      | * Adjusted to reflect all prior rate cha                      |  |                                       |
| •    | * Change in Company's premium le                              |  |                                       |
|      | result from application of new rate                           | S.   |                                       |
|      |   |  | Seneca Insurance Company              |
|      |   |  | Name of Company                       |
|      |   |  | Name of Company                       |
|      |   |  |                                       |
|      |   |  |                                       |

Kevin Purcell - VP (IRC)

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 9/1/2010

|      | (1)   | (2)<br>Annual Premium<br>Volume (Illinois)*     | (3)<br>Percent<br>Change (+ or -)** |
|------|---|---|-------------------------------------|
|      | <u>Coverage</u>                                 | Volume (minois)                                 | Change ( · Or -)                    |
| 1.   | Automobile Liability Private                    |   |                                     |
|      | Passenger Commercial                            | 3,124,975                                       | 9.1%                                |
| 2.   | Automobile Physical Damage                      |   |                                     |
|      | Private Passenger Commercial                    | \$342,798                                       | 36.4%                               |
| 3.   | Liability Other Than Auto                       |   |                                     |
| 4.   | Burglary and Theft                              |   |                                     |
| 5.   | Glass   |   |                                     |
| 6.   | Fidelity  |   |                                     |
| 7.   | Surety  |   |                                     |
| 8.   | Boiler and Machinery                            |   |                                     |
| 9.   | Fire  |   |                                     |
|      | Extended Coverage                               |   |                                     |
|      | Inland Marine                                   |   |                                     |
|      | Homeowners                                      |   |                                     |
|      | Commercial Multi-Peril                          |   |                                     |
|      | Crop Hail                                       |   |                                     |
| 15.  | Other   |   |                                     |
|      | Line of Insurance                               |   |                                     |
| Dos  | es filing only apply to certain territory (t    | erritories) or certain classes? If so, specify: |                                     |
| 200  | to design apply to design territory (t          | ormonos, or contain diagons. It so, specify.    |                                     |
|      | ***   |   |                                     |
| Brie | of description of filing. (If filing follows ra | ates of an advisory organization, specify orgar | nization):                          |
| Revi | son of Commercial Automobile Loss Cost Multipl  | iers  |                                     |
| Refe | rence Designation Number CA-2009-RLC09          |   |                                     |
|      |   |   |                                     |
|      | justed to reflect all prior rate changes.       |   |                                     |
| **C  | hange in Company's premium level wh             | nich will result from application of new rates. |                                     |
|      |   | ODADTA INCLIDANCE COMPAN                        | un.                                 |
|      |   | SPARTA INSURANCE COMPAN                         |                                     |
|      |   | Nam   | e of Company                        |
|      |   | Brian P. Mulroy, EVP & CUO                      |                                     |
|      |   |   | ficial – Title                      |

#### **SUMMARY SHEET**

| Chang         | e in Company's premium or rate level   | produced by rate revision effective           | October 1, 2010          |
|---------------|--|---|--------------------------|
|               | (1)  | (2)<br>Annual Premium                         | (3)<br>Percent           |
|               | <u>Coverage</u>  | Volume (Illinois)*                            | <u>Change (+ or -)**</u> |
| 1.            | Automobile Liability<br>Private Passenger  |   |                          |
| •             | Commercial   | \$229,504                                     | -8.3%                    |
| 2.            | Automobile Physical Damage<br>Private Passenger  |   |                          |
|               | Commercial   | \$46,332                                      | -8.3%                    |
| 3.            | Liability Other Than Auto  | Ψ+0,332                                       | 0.570                    |
| 4.            | Burglary and Theft   |   |                          |
| 5.            | Glass  |   |                          |
| 6.            | Fidelity   |   |                          |
| 7.            | Surety   |   |                          |
| 8.            | Boiler and Machinery   |   |                          |
| 9.            | Fire   |   |                          |
| 10.           | Extended Coverage  |   |                          |
| 11.           | Inland Marine  |   |                          |
| 12.           | Homeowners   |   |                          |
| 13.           | Commercial Multi-Peril   |   |                          |
| 14.           | Crop Hail  |   |                          |
| 15.           | Other  |   |                          |
|               | Line of Insurance  |   |                          |
| Does f<br>No. | iling only apply to certain territory (te  | rritories) or certain classes? If so, specify | <i>/</i> :               |
|               |  |   |                          |
|               | lescription of filing. (If filing follows nee Services Office, Inc. (ISO)  | rates of an advisory organization, specify    | organization):           |
|               | 10-BRLA1, Revised Commercial Aut   | to Advisory Prospective Loss Costs            |                          |
| * A           | djusted to reflect all prior rate changes nange in Company's premium level who sult from application of new rates. | ·   |                          |

Stonington Insurance Company
Name of Company

Vice President – Technical Services
Official - Title

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level proeduced by               | rate revision effective:                           | 12/1/2010                          |
|--|--|------------------------------------|
| (1)<br><u>Coverage</u>   | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u> | (3)<br>Percent<br>Change (+ or-)** |
| Automobile Liability Private Passenger                               | A470 702   | -10.3%                             |
| Commercial   | \$470,782  | -10.376                            |
| 2. Automobile Physical Damage Private Passenger                      | 4112.660   | 2.9%                               |
| Commercial   | \$113,660  | 2.370                              |
| 3. Liability Other Than Auto   |  |                                    |
| <ul><li>4. Burglarly and Theft</li><li>5. Glass</li></ul>            |  |                                    |
| 6. Fidelity  |  |                                    |
| 7. Surety  |  |                                    |
| 8. Boiler and Machinery  |  |                                    |
| 9. Fire  |  |                                    |
| 10. Extended Coverage  |  |                                    |
| 11. Inland Marine  |  |                                    |
| 12. Homeowners   |  |                                    |
| 13. Commercial Multi-Peril   |  |                                    |
| 14. Crop Hail  |  | ****                               |
| 15. Other  | A Comment  |                                    |
| Line of Insurance  |  |                                    |
| Does filing only apply to certain territory (territories) or certain | in classes? If so, specifiy:                       |                                    |
| Brief description of filing. (If filing follows rates or an advisor  | ry organization, specify organization              | 1                                  |
| Adopt ISO loss costs (Reference Filing # CA-2010-BRLA1) a            | and revise Loss cost multipliers                   |                                    |
|  |  |                                    |
|  |  |                                    |

Wausau Business Insurance Company

Name of Company

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates..

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in Company's premium or rate level proeduc           | ced by rate revision effective:                    | 12/1/2010                          |
|---|--|------------------------------------|
| (1) <u>Coverage</u>   | (2)<br>Annual Premium<br><u>Volume (Illinois)*</u> | (3)<br>Percent<br>Change (+ or-)** |
| 1. Automobile Liability Private Passenger                   |  | -10.3%                             |
| Commercial  | \$2,379,448  | -10.5%                             |
| 2. Automobile Physical Damage Private Passenge              | r  | 2.00/                              |
| Commercial  | \$545,588  | 2.9%                               |
| 3. Liability Other Than Auto                                |  |                                    |
| 4. Burglarly and Theft                                      |  |                                    |
| 5. Glass  |  |                                    |
| 6. Fidelity   |  |                                    |
| 7. Surety   |  |                                    |
| 8. Boiler and Machinery                                     |  |                                    |
| 9. Fire   |  |                                    |
| 10. Extended Coverage 11. Inland Marine                     |  |                                    |
| 12. Homeowners  |  |                                    |
| 13. Commercial Multi-Peril                                  |  |                                    |
| 14. Crop Hail   |  |                                    |
| 15. Other   |  |                                    |
| Line of Insurance   |  |                                    |
| Does filing only apply to certain territory (territories)   | or certain classes? If so, specifiy:               |                                    |
| Brief description of filing. (If filing follows rates or an | advisory organization, specify organization        |                                    |
| Adopt ISO loss costs (Reference Filing # CA-2010-B          | RLA1) and revise Loss cost multipliers             |                                    |
|   |  |                                    |

Wausau Underwriters Insurance Company

Name of Company

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates...

## FORM (RF-3)

## **SUMMARY SHEET**

| (1)  | (2) Annual Premium            | (3) Percent               |
|--|-------------------------------|---------------------------|
| Coverage   | Volume (Illinois) *           | Change (+or-) **          |
| Automobile Liability Private                                 |                               |                           |
| Passenger  |                               | -0.40/                    |
| Commercial   | 9,328,003                     | +6.1%                     |
| Automobile Physical Damag                                    |                               |                           |
| Private Passenger  | 0.147.474                     | . 4.00/                   |
| Commercial   | 3,147,471                     | +1.2%                     |
| Liability Other Than Auto                                    |                               |                           |
| Burglary and Theft   |                               |                           |
| Glass  |                               |                           |
| Fidelity   |                               |                           |
| Surety   |                               |                           |
| Boiler and Machinery   |                               |                           |
| Fire   |                               | ·                         |
| Extended Coverage  |                               |                           |
| Inland Marine  |                               |                           |
| Homeowners   |                               |                           |
| Commercial Multi-Peril                                       |                               |                           |
| Crop Hail  |                               |                           |
| Other  |                               |                           |
| Life of Insurance  |                               |                           |
| Does filing only apply to certa Classes? If so, specify:     | in territory (territories) or | certain                   |
|  |                               |                           |
| Brief description of filing. (If f                           | iling follows rates of an a   | advisory                  |
| Organization, specify  |                               |                           |
| organization):   | ADOPTION OF LOSS CO           | OSTS FOUND IN CIRCULAR    |
| FILING REFERENCE CA-2009-BRLA1                               |                               |                           |
|  |                               |                           |
| *Adjusted to reflect all prior ra **Change in Company's prem |                               | ılt from application of n |
| rates.   | WESTEIEI D INSI               | JRANCE COMPANY            |
|  | AAEQ I LIEFT IIAQ(            | JI VANUL UUNTAN I         |

Name of Company

JAN ANSCHUTZ - LINE OF BUSINESS SPECIALIST

Official — Title

# Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Change in company's premium or rate lev  | el produced by rate revision effective     | 10/1/2010                 |
|--|--|---------------------------|
| (1)  | (2)  | (3)<br>Percent            |
| _  | Annual Premium                             |                           |
| <u>Coverage</u>  | Volume ( Illinois )*                       | <u>Change ( + or - )</u>  |
| 1. Automobile Liability Private  |  |                           |
| Passenger Commercial   | \$77,256                                   | -9.9%                     |
| 2. Automobile Physical Damage  | <del></del>                                |                           |
| Private Passenger Commercial   | \$9,952                                    | -3.5%                     |
| 3. Liability Other Than Auto   |  |                           |
| Burglary and Theft   |  |                           |
| 5. Glass   | <del></del>                                |                           |
| 6. Fidelity  |  |                           |
| 7. surety  |  |                           |
| 8. Boiler and Machinery  |  |                           |
| 9. Fire  | <del></del>                                |                           |
| 10. Extended Coverage  |  |                           |
| 11. Inland Marine  | <del></del>                                |                           |
| 12. Homeowners   |  |                           |
|  |  |                           |
| 13. Commercial Multi-Peril   |  |                           |
| 14. Crop Hail  |  |                           |
| 15. Other  | · · · · · · · · · · · · · · · · · · ·      |                           |
| Line of Insurance  |  |                           |
| Does filing only apply to certain territory (                                      | territories ) or certain classes? If so, s | specify: No               |
| Brief description of filing . ( If filing follows<br>Adoption of ISO Loss Cost     | rates of an advisory organization, sp      | ecify organization ):     |
| *Adjusted to reflect all prior rate changes. **Change in Company's premium level w |  | v rates.                  |
|  | Westo                                      | ort Insurance Corporation |
|  |  | Name of company           |

LeAnne Pope, Team Leader - State Filings Official-Title